The state of the s

Please type a plus sign (+) inside this box — +

PTO/SB/05 (11-00 Approved for use through 10/31/2002 OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION TRANSMITTAL

1-15207 Attorney Docket No.

James J. Huttner First Inventor

Title Method For Controlling The Pain From

Express Mail Label No. EL469908096US

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))) Express	Mail Label No.	EL469908	096	JS
	TION ELEMENTS	i i	PRESS TO: B	ox Patent Ap	pplicat	
1. X Fee Transmittal Figuinum an original and a Applicant claims is See 37 CFR 1 27. 3. X Specification (preferred arrangemen - Descriptive title - Cross Reference - Statement Region - Reference to se or a computer possible - Brief Summary	[Total Pages 20] It set forth below) of the invention to to Related Applications arding Fed sponsored R & Dequence listing a table, program listing appendix the Invention of the Invention or of the Drawings (If filed)	7	CD-ROM or CD-F Computer Progra cleotide and/or Amino applicable, all necess Computer Read Specification Sequen CD-ROM CD-ROM Fig. paper Statements veri	m (Appending Acid Sequential Acid Sequential Acid Sequential Acid Sequential Acid Sequential Acid Acid Acid Sequential Acid Acid Sequential Acid Acid Sequential Acid Sequenti	e, large k) ence S CRF) n: copie y of ab	e table or ubmission s); or ove copies DN PARTS document(s))
- Abstract of the	5]]]10. [] 11. [37 CFR 3.73(b) (when there is a English Translat	n assignee) ion Docume	ent (if a	Power of Attorney applicable) Copies of IDS
b. Copy from a for continual	[Total Pages 3 uted (original or copy) prior application (37 CFR 1 63 (d)) tion/divisional with Box 18 completed, ION OF INVENTOR(S) atement attached deleting inventor(s)]	Statement (IDS) Preliminary Ame Return Receipt (Should be spec Certified Copy of	/PTO-1449 endment Postcard (W ifically itemi	zed)	Citations
named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b) 6. Application Data Sheet See 37 CFR 1.76		16	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1 76 Continuation Divisional Continuation-in-part (CIP) Of prior application No. Prior application information. Examiner Group Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
	19. CORRESPO	ONDENCE ADD	RESS			
Customer Number or Bar C	ode Label		or	Correspon	dence a	ddress below
Name	Donald A. Schurr					
	Marshall & Melhorn, LLC		·			
Address	Four SeaGate, 8th Floor					
City	Toledo State		Ohio	Zip C	Code	43604
Country	U.S.	Telephone	(419) 249-7145	Fá	3X	(419)249-7151
Name (PrintiType)	Donald A. Schurr	Reg	istrațion No. (Attori	ney/Agent)	34	,247
Signature	Donal & A	M 5	V-	Date	07/3	31/01

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Signature

Donald A. Schurr

/ውነ	61	_	Λ	n
(\$)	וסו	ວ	.U	u

Complete if Known		
Application Number		
Filing Date		
First Named Inventor	James J. Huttner	
Examiner Name		
Group Art Unit		
Attorney Docket No	1-15207	

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. X The Commissioner is hereby authorized to charge indicated fees and credit any overcomments to.	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to. Deposit	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description F	ee Paid			
Account Number	Code (\$) Code (\$)	CE I AIU			
Deposit	105 130 205 65 Surcharge - late filing fee or oath				
Account Name Marshall & Melhorn	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	139 130 139 130 Non-English specification				
Applicant claims small entity status	147 2,520 147 2,520 For filing a request for ex parte reexamination				
See 37 CFR 1 27	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
2. X Payment Enclosed: X Check Credit card Money Order Other	113 1,840* 113 1 840* Requesting publication of SIR after Examiner action				
FEE CALCULATION	115 110 215 55 Extension for reply within first month				
	116 390 216 195 Extension for reply within second month				
1. BASIC FILING FEE Large Entity Small Entity	117 890 217 445 Extension for reply within third month				
Fee Fee Fee Fee Description	118 1,390 218 695 Extension for reply within fourth month				
Code (v) Code (v)	128 1,890 228 945 Extension for reply within fifth month				
300	119 310 219 155 Notice of Appeal				
	120 310 220 155 Filing a brief in support of an appeal				
107 490 207 245 Plant filing fee 108 710 208 355 Reissue filing fee	121 270 221 135 Request for oral hearing				
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding				
	140 110 240 55 Petition to revive - unavoidable				
SUBTOTAL (1) (\$) 355.00	141 1,240 241 620 Petition to revive - unintentional				
2. EXTRA CLAIM FEES	142 1,240 242 620 Utility issue fee (or reissue)				
Fee from Extra Claims <u>below</u> <u>Fee Paid</u>					
Total Claims 40 -20** = 20 × 9 = 180	144 600 244 300 Plant issue fee				
Independent Claims $5 - 3^{**} = 2 \times 40 = 80$	122 130 122 130 Petitions to the Commissioner				
Multiple Dependent =	123 50 123 50 Petitions related to provisional applications				
•	126 240 126 240 Submission of Information Disclosure Stmt				
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)				
103 18 203 9 Claims in excess of 20	146 710 246 355 Filing a submission after final rejection (37 CFR § 1 129(a))				
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))				
109 80 209 40 ** Reissue independent claims over original patent	179 710 279 355 Request for Continued Examination (RCE)				
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169 900 169 900 Request for expedited examination of a design application				
(2)	Other fee (specify)				
SUBTOTAL (2) (\$)260.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) -0)_			
**or number previously paid, if greater, For Reissues, see above	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (3) -0				
SUBMITTED BY	Complete (if applicable)				

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Registration No

(Attomey/Agent)

34,247

(419) 249-7145

07/31/01

NEW PATENT APPLICATION

APPLICANTS: James J. Huttner

TITLE: METHOD FOR CONTROLLING THE PAIN

FROM INJECTIONS OR MINOR SURGICAL PROCEDURES AND APPARATUF FOR USE

THEREWITH

ATTORNEYS: MARSHALL & MELHORN, LLC

ATTORNEY

DOCKET: 1-15207

"Express Mail" Mailing Label Number_ <u>EL469908096US</u>
Date of Deposit July 31, 2001 I hereby certify that this paper or fee
is being deposited with the United States Postal Service "Express Mail
Post Office to Addressee" service under 37 CFR 1.10 on the date
indicated above and is addressed to the Commissioner for Patents,
BOX PATENT APPLICATION, Washington, DC 20231.
Heidi M. May
(name)
11:1:20 00 0.12

(signature)